DEPARTMENT OF SOCIAL SERVICES 744 P Street, M/S 19-31 Sacramento, California 95814

RE:	Adoption of Born By				
COURT	T REPORT DUE				
	May we request your assistance in interviewing the (natural mother/alleged natural father and/or presumed father/or parents) of the above child, concerning (her/his/their) wish to consent to this adoption. Since this placement was made without the help of an adoption agency, our department is required to submit a report to the Superior Court with our recommendation concerning the suitability of the petitioner's				
	home and whether or not the child is legally free for adoption.				
	For a child to be adopted in California, the rights of the parents must be terminated. The alleged natural father has the right to be heard in court and a determination made as to his legal rights to the child unless he waives such rights, denies paternity, or consents to the adoption.				
	The Paragraphs Pertinent To This Request Are Checked				
	The placement was made by the parent in California in accordance with California law and the parent subsequently moved to your State.				
	The petitioners report that they traveled to your State and received the child from				
	We are informed that arrangements were made for the placement of the child in this home by				
	on				
	We would like the parent(s) version about why and how the placement was arranged and whether the parent(s) met the petitioners. Did the petitioners pay any expenses other than the medical bills? Any additional information you can send us will be greatly appreciated.				
	We are informed that the natural parent(s) is/are now living alone/with				
	(PRESENT CIRCUMSTANCES)				
	We understand the parent(s) wish(es) any correspondence be sent to (her/him/them) in a plain envelope. Enclosed is a copy of a letter we have written to the parent(s).				
	As we all know, detailed information about the natural parents, physical description, and medical and background information may be very important to the child in future years. This information is collected on the "Information About the Birthmother" (AD 67) and the "Information About the Birthfather" (AD 67A) forms. It is important that the mother's full marital history be completed, including date(s), city(ies), and state(s) and name(s) of present and former spouse(s). Her marital history will be verified by us to determine whose consent to the adoption are needed.				
	We are enclosing the consent form(s) and other necessary paper(s). The (natural mother/alleged father, father/parents) should read the Statement of Understanding and sign it before signing the consent. Please have the consents signed in their legal names and any other name(s) by which (she/he/they) (is/are) currently known. Please obtain proper means of identification (e.g., driver's license or other official identification card, etc.) with the legal name. Two copies of the consent(s) must be notarized and returned to us. The (natural mother/alleged father, father/parents) may have the third copy of the consent and the second copy of the Statement of Understanding if (she/he/they) wish(es). Will you advise the (natural mother/alleged father, father/parents) that (she/he/they) remain(s) legally responsible for the child until the adoption is granted by the court. For this reason, in case the adoption is not completed, we must have a permanent address where the parent(s) can be reached.				
	Please ascertain if the (mother/alleged father, father/parents) (has/have) had any psychiatric treatment or hospitalization. If so, please secure competency statement before consents are signed: (a) if parent had therapy, secure statement from psychiatrist (signed within the last 30 days), or (b) if mental hospital, secure statement verifying discharge if within the past two years and legal restoration of competency, if it has been removed by court action.				
	Please discuss the finality of signing consent with the parent(s). Once the consent is signed the parent has 90 days during which he/she may revoke the consent. The parent may waive the right to revoke the consent by signing the "Waiver of Right to Revoke Consent" form(AD 929) in the presence of one of the persons indicated on the form.				
	In view of the Indian Child Welfare Act, Public Law 95-608, please do not take the parent's consent if she states she is of American Indian descent. Instead, complete Information on American Indian Child , Form AD 4311, and return it to our office. The form will be reviewed by the Bureau of Indian Affairs before you will be asked again to take the consent, as it may be necessary for the consent to be signed in the court in the presence of a judge.				

IF NATURAL F	ATHER IS NOT	THE LEGAL FATHER:			
Please discuss with the natural mother the need to know the name of the alleged natural father and how he may be contacted. If he is in your area, we would appreciate your interviewing him in relation to his thinking about adoption for the minor. If he agrees to the adoption plan, please have him sign the consent in the same manner as the natural mother.					
If the alleged natural father refuses to consent, or neither confirms nor denies paternity, he and the natural mother shall be advised that the natural mother or the petitioners are then required to file a petition with the court to determine the necessity of the alleged natural father's consent to the adoption. Therefore, it will be necessary for the natural mother to complete the enclosed Declaration of Mother (AD 880).					
of Paternity. If t	he alleged natur	al father refuses to sign		m sign, in duplicate, the enclosed Denia paternity, will you please request him to nning Form AD 590.	
		END OF NATURA	L FATHER SECTION		
We are submitt wish(es):	ng the following	information concerning	the petitioners, which is to	be given to the parent(s), if (she/he/they	
Γhe man petition religion. He cor	oner is npleted	years of age, of grade and is emplo	oyed as (an/a)	descent, and	
The woman pe religion. She co	titioner is mpleted	years of age, of _ grade and is employ	ved as (an/a)	_ descent, and	
The couple was The age(s) of the	s married on ne child(ren) is/a	re	They have	children of their own.	
The family's an	nual income is a	pproximately	·		
The child is cared for by while the parent(s) is/are at work.					
OR:					
		•	e child and say he/she is h	appy and in good health.	
Thank you for y	our prompt atter	ntion and cooperation in	helping us meet the lega	deadline.	
Sincerely,					
Adoptions Case	eworker				
Enclosures:	Statement of Information a Declaration of	m (AD 1A/1C/166/594) f Understand (AD 887) About Birthmother (AD 6 about Birthfather (AD 67 of Mother (AD 880) onsent (AD 20)			

Waiver of Right to Further Notice of Adoption Planning (AD 590)

Information on American Indian Child (AD 4311)
Psychosocial and Medical History (AD 512)

Other: